

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T.A.	JCRUH	02/27/01
RESPONSE FORMALITY REVIEW	TV	276	03/23/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	11/9/02
2	10/31/02
3	10/31/02
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26	
27	
28	
29	✓ ✓
30	✓ ✓
31	✓ ✓
32	✓ ✓
33	✓ ✓
34	✓ O
35	✓ O
36	✓ ✓
37	✓ ✓
38	✓ ✓
39	✓ ✓
40	N N
41	N N
42	N N
43	N N
44	✓ N
45	✓ ✓
46	✓
47	✓
48	✓
49	✓
50	✓ ✓

Claim	Date
Final	
Original	
51	✓ ✓
52	✓
53	✓
54	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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